# Maine Revenue Services
## Gasoline Distributor
## Annual Shrinkage Allowance Computation
### Reconciliation

| Taxpayer | Registration Numbe | Entity Number |
|---|---|---|
|  |  |  |

1. Total Receipts - Box "A" (from Page 2)     1. [____]

2. Allowable Shrinkage @ .00 Line 1 (Total receipts) multiplied by .005    2. [____]

3. Total Transfers - Box "E" (from Page 3)    3. [____]

4. Allowable Shrinkage @ .00 Line 3 (Total transfers) multiplied by .005    4. [____]

5. Total Allowable Shrinkage Line 2 plus Line 4 (Cannot exceed .01 of Total Receipts)    5. [____]

    (If it does, enter .01 of Total Receipts on line 5)

6. Actual Net Shrinkage - Box "D" (from Page 2)    6. [____]

7. Unaccounted Fu Line 6 (Actual Shrinkage) minus Line 5 (Allowable Shrinkage). If zero    7. [____]
    less than zero, enter zero, sign the return and mail to Maine Revenue Services.

     x   .22

Additional Excise Tax Due    Make check out to Treasurer of State and enclose with retu   $ [____]

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Signature      Title      Phone      Date

Make check or money order payable to the STATE TREASURER and mail to:

Maine Revenue Services, P. O. Box 1064, Augusta, ME  04332-1064

If you have questions regarding this return, call (207) 624-9692.

# Maine Revenue Services
## Gasoline Distributor
## Annual Shrinkage Allowance Computation

| Taxpayer | Registration Number | | Entity Number | | | |
|---|---|---|---|---|---|---|
| | | | | | | |

| | Beginning Inventory | Receipts | Total Available Gallons | Ending Inventory | Total Accountable Gallons | Total Gallons Sold/Use | Gain/ (Shrinkage) |
|---|---|---|---|---|---|---|---|
| | (1) | (2) | (3) | (4) | (5) | (6) | (7) |
| 2001 | | | (Col 1 plus Col 2) | | (Col 3 minus Col 4) | | (Col 6 minus Col 5) |
| Jan | | | | | | | |
| Feb | | | | | | | |
| Mar | | | | | | | |
| Apr | | | | | | | |
| May | | | | | | | |
| June | | | | | | | |
| July | | | | | | | |
| Aug | | | | | | | |
| Sept | | | | | | | |
| Oct | | | | | | | |
| Nov | | | | | | | |
| Dec | | | | | | | |
| Totals | | | | | | | |
| | | | (A) | | (B) | (C) | |

**If Box "C" is greater than or equal to Box "B", there is no shrinkage**

**allowance to compute.  Bring zero forward to line 6, page 1,**
**sign the return and mail both pages 1 & 2 by January 31, 2002.**

**(If Box "B" is greater than Box "C",**                                    **Net Shrinkage**

**subtract Box "C" from Box "B" and enter here.)**

(D)

**(To page 1, line 6)**

# Maine Revenue Services
## Gasoline Distributor
## Annual Shrinkage Allowance Computation
## Transfers

| Taxpayer | Registration Numb | Entity Number |
|---|---|---|
| | | |

| | Vessels (Gallons) (1) | Tank Cars (Gallons) (2) | Full Tank Truck Loads (Gallons) (3) | Total Transfers (Gallons) (4) |
|---|---|---|---|---|
| 2001 | | | | (Cols 1+2+3) |
| Jan | | | | |
| Feb | | | | |
| Mar | | | | |
| Apr | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug | | | | |
| Sept | | | | |
| Oct | | | | |
| Nov | | | | |
| Dec | | | | |
| | | | | (E) |

(to Page 1, Line 3)